

WISEWOMAN

A Crosscutting Program to Improve the Health of Uninsured Women 2005











"I knew I needed to make some changes in my life, or I would follow in the footsteps of my mother's poor health. The WISEWOMAN program at the Women's Health Network identified my health problems, and I began to make changes to better myself."

Verna DeAngelis Massachusetts WISEWOMAN participant Women's Health Support Group champion

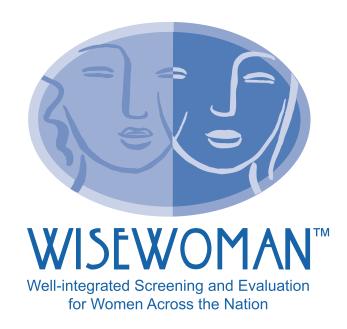
Increased Health Risks for Uninsured Women

In 1999, about 1 of every 10 U.S. women aged 40–64 years was uninsured. Uninsured women are more likely to be members of minority racial and ethnic groups, to have less education, and to be poorer than insured women. Their ability to pay for health care is limited. Uninsured women may be especially vulnerable to cardiovascular disease and other chronic diseases because they are more likely than insured women to smoke cigarettes and to be overweight. They also are less likely to engage in physical activity and to be aware of their cholesterol levels.

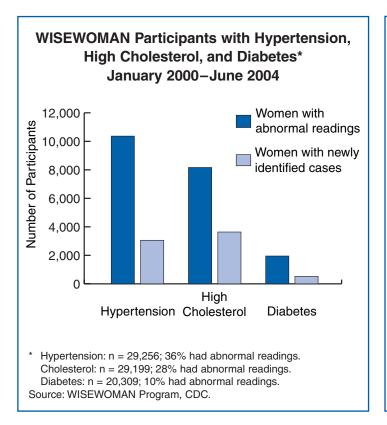
Among women aged 40 years or older, 71% of those who are insured report having had a mammogram in the previous year, compared with only 46% of uninsured women. Uninsured U.S. adults also are less likely to be screened for high blood pressure and high cholesterol and to be advised by a health care professional to lose weight and quit smoking.

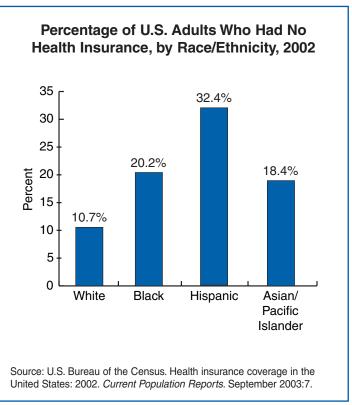
Cardiovascular Disease: The Leading Cause of Death Among Women

Although heart disease and stroke are commonly believed to affect men primarily, more than half of all people who die of heart disease and stroke are women. Among women, heart disease is the leading cause of death and is often not diagnosed until it has progressed to an advanced stage. Addressing risk



factors such as high cholesterol, high blood pressure, obesity, sedentary lifestyle, and smoking greatly reduces women's risk for illness and death from heart disease. However, screening, intervention, and treatment services for these risk factors are often beyond the reach of uninsured women.





CDC's Leadership in Promoting Healthy Lifestyles

WISEWOMAN is a CDC-funded program that helps women without insurance gain access to screening and lifestyle interventions that can reduce their risk for heart disease and other chronic diseases. The WISEWOMAN program was established through 1993 legislation that authorized the expansion of services offered through the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) to include screenings and interventions for chronic disease risk factors.

Women who qualify for WISEWOMAN services are participants in NBCCEDP who are aged 40–64 and have little or no health insurance. Many of these women are members of racial and ethnic minority populations and have risk factors for heart disease and stroke.

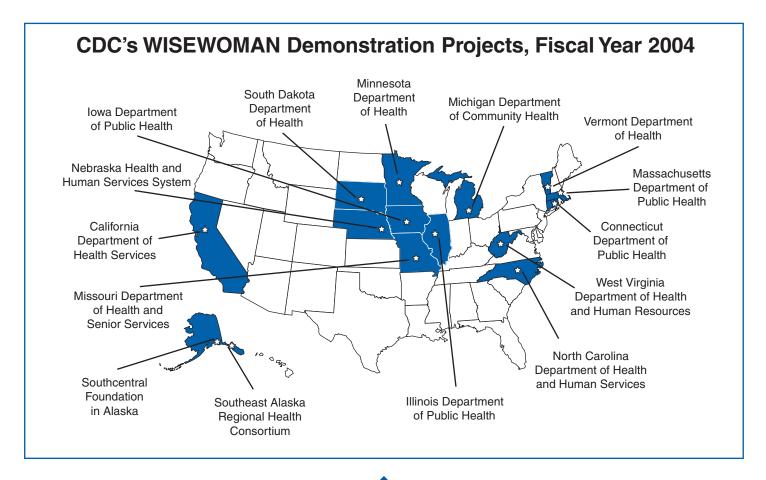
In 1995, CDC launched WISEWOMAN demonstration projects in three states—Massachusetts, North Carolina, and Arizona. In their first year, these projects demonstrated that offering screening tests for chronic disease risk factors to women in the NBCCEDP was feasible and well accepted by providers and participants. Lifestyle interventions were directed at changing behavioral risk factors for chronic diseases, especially physical activity and unhealthy diets. Each project tested different interventions to determine which ones worked best for their populations. Specific interventions included structured

counseling, physical activity classes, and walking groups. Early studies of the effectiveness of selected interventions found that participants reported reducing the fat in their diets and becoming more physically active.

Increasing the Reach of WISEWOMAN

Since 1995, WISEWOMAN has gradually expanded its reach to low-income, uninsured women. From the initial three projects in three states, the program has grown to 15 projects in 14 states as of June 2004. For fiscal year 2004, CDC received \$14 million to fund WISEWOMAN projects. From January 2000 through June 2004, more than 30,000 women aged 40–64 were screened for risk factors for heart disease and stroke. Women enrolling in the program during this period had a high prevalence of risk factors for heart disease and stroke—75% were either overweight or obese, 26% smoked, 25% had high blood pressure, and 23% had high cholesterol.

In addition, CDC funds studies at Prevention Research Centers throughout the country. These studies are designed to develop effective interventions that reduce risk factors for heart disease and stroke and other chronic diseases among women participating in NBCCEDP.



WISEWOMAN: Fostering Community Partnerships to Improve Women's Health

Community partnerships help strengthen WISEWOMAN projects. By pooling resources and sharing lessons learned, WISEWOMAN programs and their partners can offer underserved women an array of health services they otherwise would not receive. In addition to offering screening, WISEWOMAN goes a critical step further by ensuring access to quality education and skill-building opportunities for all women and by promoting support groups to help women change and maintain healthy behaviors, as the following examples illustrate.

Promoting Physical Activity Through Community Partnerships

The Healthwise program in Winston-Salem, **North Carolina**, funded by the Kate B. Reynolds Charitable Trust and the WISEWOMAN program, provides health education, counseling, and referrals to WISEWOMAN clients. As part of their counseling, clients are encouraged to become more physically active. Most clients are referred to exercise classes or walking groups sponsored by Healthwise. However, patients with



physical limitations or schedule conflicts need additional options. WISEWOMAN, Healthwise, and the YWCA began a partnership that provides WISE-WOMAN participants with YWCA

scholarships to encourage participation in physical activity appropriate for their health needs during convenient evening and weekend hours. As women seek to achieve their health goals, WISEWOMAN offers ongoing support and motivation and fosters a supportive environment among participants.

Through access to Healthwise and the YWCA, WISEWOMAN clients have had opportunities to become more physically active, lose weight, and better control their blood pressure and cholesterol levels.

Massachusetts Women Help Each Other Through Support Group

Social support and peer-led groups can be important in helping women change and maintain healthy behaviors. In response to a request from women in rural Ware, **Massachusetts**, for a support group to help them adopt healthier lifestyles, the state's Women's Health Network created the Women's Health Support Group. WISEWOMAN is one program that provides services to women eligible for the Women's Health Network.

Support group members, who have weight problems or high blood pressure, cholesterol, or blood sugar levels, are referred to the WISEWOMAN program, while WISEWOMAN participants who want additional support are referred to the support group. Each month, group meetings provide health tips and help in managing blood pressure, cholesterol, and blood sugar levels. Meetings also offer hands-on activities such as swapping and tasting recipes and cooking healthy meals. The support group makes sure that the interests of the participating women drive the group's agenda. Together, WISEWOMAN and the Women's Health Support Group are helping to ensure that underserved women in Ware, Massachusetts, get the care and support they need to adopt healthy lifestyles.

Future Directions

The WISEWOMAN program is unique because it addresses multiple health needs of women by partnering with other CDC programs and by providing comprehensive interventions that help participants adopt healthier lifestyles. Partners such as CDC's Office on Smoking and Health, Division of Diabetes Translation, Division of Cancer Prevention and Control, and Division of Adult and Community Health provide guidance on ways to help women stop smoking, reduce their risk for heart disease and stroke, increase their physical activity levels, and improve their diet. CDC has evaluated WISEWOMAN projects to learn which interventions work best. During fiscal year 2005, CDC will promote best practices to grantees, health educators, and other health care professionals.

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